

the Massachusetts

nurse



THE NEWSLETTER OF THE MASSACHUSETTS NURSES ASSOCIATION

Vol. 87 No. 2



ADVOCATE

Attention:

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Proposed bylaw changes, pg. 13

RNs at Baystate Franklin and Tufts take a stand!



July/August 2017



Massachusetts Nurses Association

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Donna Kelly-Williams

Last month, as many of you already know, thousands of our members engaged in three powerful and game-changing job actions/events that are undoubtedly destined for the MNA history books:

- The strike at Baystate Franklin Medical Center in Greenfield.
- The strike at Tufts Medical Center in Boston.
- The hearing on our workplace violence prevention bill (now renamed Elise's Law, after Elise Wilson, the RN at Southbridge's Harrington Hospital who was brutally stabbed by a patient).

It is rare for the MNA to see three events like these line up so close together. The one-day strike at Baystate started June 26, followed by the one-day strike at Tufts on July 12, followed by the hearing on Elise's Law on July 19. Strikes and legislative hearings both require a level of planning, prep, and organization that is almost indescribable. The same is true for the important roles elected union leaders, MNA staff members, volunteers, and supporters play in making everything come together and getting the public to actually *care* about these events.

But, in that regard, there was no doubt: These events put the MNA and all that it stands for — nurse activism, healthcare advocacy, quality patient care via safe nurse-to-patient limits, and worker solidarity through union affiliation — in the spotlight. In fact, for nearly a month, it was almost impossible to turn on the TV or radio, or to open a newspaper, and not see the MNA front and center.

In western Massachusetts, our nurses and their supporters were striking for the second time in five years. They were calling on man-

agement to negotiate in good faith for safer staffing, end forced overtime, and to protect health insurance benefits (see pg. 3). Both state and regional media covered every detail the strike unfolded, and the nurses' fight and messages both resonated with the public and rallied the local community.

In Boston, our nurses took to the streets to fight for basic improvements in nurse-to-patient staffing levels and increased nursing resources, as well as market-competitive wages and basic retirement benefits/improvements (see pg. 4). Again, their fight made headlines — not just locally and regionally, but nationally as well. This strike was history-making of course, with Tufts' nurses being the first in Boston to strike in 31 years and the largest group of nurses ever to strike in Massachusetts' history. Without doubt, that helped to pique the interests of both the public and the media, with the nurses' earning daily news coverage on both coasts and everywhere in between. But it was the focus of those news stories that was most powerful: By striking for improved staffing limits and working conditions, the Tufts nurses were taking a stand for their patients, their practice, and their future. Again, the public and labor movement rallied around our nurses in a way that I have never before witnessed.

Next: July 19, just about 48 hours after the four-day lockout at Tufts ended. MNA members are again at bat, this time at the State House to participate in the hearing on Elise's Law (pg. 8), which was being heard by the Committee on Public Safety and Homeland Security. This was not the first time we had filed and testified in favor of this bill, which aims to require health care employers to develop and implement individualized workplace violence prevention plans. But it was the first time we were able to name the bill in honor of a victim of the very violence that the bill aims to address.

Elise Wilson's terrifying story resonated with all of us, because we have all known and seen workplace violence inside our facilities. This meant that Elise wasn't just a stranger. She was our coworker. She was the nurse working down the hall. She was the nurse who comes in at change of shift and takes over caring for our patients. She was, and is, our sister, our friend, our aunt, our mother, our daughter. And never should she have been harmed, let alone harmed while at work caring for others.

Elise's willingness, and the willingness of her family, to support the MNA in its workplace violence prevention efforts was invaluable. Her story, told through the words of her family and friends during the hearing, made it abundantly clear to the legislators in that hearing room that what we have been telling them about workplace violence inside of hospitals was real and that now is the time to do something about it. By the end of the work day on July 19, the Senate version of the bill was favorably reported out. Simultaneously, the MNA's Facebook post highlighting the hearing and Elise's story had gone viral, reaching more than 4.4 million people and being shared more than 20,000 times.

Again, the spotlight was ours and we used it to help others. In just 23 days, we had the entire nation paying attention to what matters most to us: safe patient care, safe patient limits, a safe workplace that is free of violence, the need for fair and equitable compensation for RNs, and the hugely important role our union solidarity plays in winning these fights.

Thank you to all who played a part in these important events, and thanks too to everyone who supported these brave nurses as they fought for what is fair, good, and true.

In solidarity,

the Massachusetts
nurse
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RNs at Baystate Franklin Medical Center Strike for Patients, Nurses



On the morning of June 26, the 200 registered nurses of Baystate Franklin Medical Center began a one-day strike for a simple but important reason: Their hospital's parent corporation has been steadily degrading patient care and nurse working conditions. The nurses refused to stand for it any longer.

The one-day strike and accompanying lockout of MNA nurses by Baystate demonstrated the unity of the RNs and the community. Hundreds of residents from Greenfield and other Franklin County towns joined nurses on the picket line and marched to a Baystate Board of Directors' business. Fellow MNA nurses, union brothers and sisters and local and state elected officials also stood with the BFMC nurses.

"We feel proud and strong to have so much community support as we fight for safe patient care," said Donna Stern, co-chair of the nurses bargaining unit. "Our one-day strike was about protecting our patients and allowing nurses to live healthy, quality lives. We worked hard for months to reach an agreement with local management that properly values and respects nurses, patients and our community. Unfortunately, it was clear that decision-makers with our parent company, Baystate Health in Springfield, were unwilling to bargain in good faith on issues like nurse workload and health insurance."

The BFMC nurses' key outstanding issues as they held the one-day strike June 26 and as they were headed back to the bargaining table on July 21:

- Baystate management refuses to bargain over RN workload and staffing, including BFMC nurses' call for an increase in RN staffing at the hospital to ensure safe patient assignments and an end to unwanted overtime, increased weekend work and unscheduled shifts.

- On top of that, Baystate is demanding to cut holidays, sick days and vacation time.
- Nurses are seeking to negotiate decent and affordable health insurance benefits, after Baystate eliminated two health insurance plans in the past year and a half, leaving substandard plans in place. Baystate also refuses to bargain over this issue.

Even as nurses prepared to strike, Baystate continued its practice of scrambling to provide adequate nursing care by leaving hundreds of RN shifts vacant on its schedule. Over 42 days in just one hospital unit, Baystate managers left 229 nurse shifts unfilled. These vacant shifts were on a medical-surgical schedule issued by the hospital on June 16 that covers six weeks. This is an ongoing problem. On another six-week schedule from the same unit, covering February 26 to April 8, the hospital left 179 nurse shifts unfilled.

"This problem speaks to the core of why nurses went on strike," said Jillian Cycz, RN and junior co-chair of the BFMC RN Bargaining Committee who works on the medical-surgical unit. "We cannot provide the high quality care our patients deserve when we have too many patients at one time, are fatigued and undernourished because we must work through our breaks, and are required to stay beyond our scheduled shifts in violation of state law."

Baystate Health responded to the nurses' one-day strike with an unprecedented and illegal preemptive lockout of its nurses. Starting at 7 p.m. on June 25 – 11 hours before the strike was scheduled to begin – and ending three days later, Baystate refused to allow any BFMC nurses inside the hospital to care for their patients. The MNA is pursuing unfair labor practice charges around this issue and others involving Baystate's refusal to bargain in good faith. ■

When a Local Contract Fight Draws National Attention

The Nurses' Strike at Tufts Medical Center

16 months and 35 sessions is a long time to sit in contract negotiations with management, especially when management announces on day-one how they expect the contract talks to unfold: Submit to us or else nothing productive will happen here, no matter how long and hard you fight for your patients, your practice, and your livelihoods.

That is exactly the position the elected MNA committee at Tufts Medical Center found itself in when their negotiations with management got underway in April of 2016. And it is exactly what led to **THIS**:



The “this,” of course, is the first strike by nurses in the city of Boston since 1986, and the largest strike by nurses in Massachusetts history. For five days last month — July 12, the actual strike, to July 17, the final day of a subsequent four-day lockout — these brave nurses and their countless supporters marched along the sidewalks of Washington Street with the following messages on their signs, on their lips, and in their hearts:

- Provide patients with more nurses and nursing resource so that they can receive the care they need and deserve.
- Offer market-competitive compensation so that new grads will come to work, and then stay, at Tufts.
- Don't freeze nurses' pensions under the guise of cost savings, especially when Tufts' top leaders are seeing huge increases in pay and benefits. Instead, negotiate a new pension program —one that is already established and fully funded — that will save Tufts \$96 million dollars, will protect senior RNs, and that will improve the retirement benefits of newer nurses.

As described above, what was at the heart of this strike was that the Tufts RNs originally went to the table asking for very reasonable contract improvements. What they got in return was an announcement from management that their number-one goal was to freeze the nurses' long-established — and long-promised — pension plan, and that, until that goal was met, nothing else of any substance would be discussed, never mind settled.



And so began a 16-month standoff that was soon being followed by the media, local legislators, the state's labor movement, and ultimately the nation. Through it all, the nurses at Tufts tried repeatedly to get at the heart of management's issues with a variety of counter proposals, negotiating strategies, and job actions.

Counter Proposals

The Tufts nurses dropped proposals and offered innovative counters throughout negotiations. For example, they pulled their proposal that aimed to mandate safe patient limits in all units, and instead asked that all charge nurses on all floors be free of a patient assignment at the start of all shifts. They also asked for expanded IV and CRN teams. Management refused.

At another point, when management proposed dramatic increases in health insurance costs, the nurses countered with a more reasonable proposal and willing took on a 3 percent annual cost increase. A sacrifice for certain for the nurses, but never a sacrifice that management acknowledged.

In what could be considered the most important compromise, the nurses said they'd be open to freezing the existing pension plan as long as the nurses who were in it remained whole and that the other nurses saw an improvement in the percentage the hospital contributed to their retirement fund. Several versions of this proposal were offered to management, including one that would have saved the hospital nearly \$96 million. Again, they refused.

Negotiating Strategy

From on-the-record proposals, to off-the-record proposals. From no federal mediator being involved, to calling for a federal mediator in April of 2017. From immediately sending out info-packed bulletins to members at the end of each session, to sending out more open-ended bulletins (at the suggestion of the mediator). Management refused to budge, and instead reverted to a strategy the nurses called "rearranging the deck chairs" on what was clearly becoming a "sinking ship." Management wouldn't add any money, benefits, or resources to their offer. But they were quite content to shuffle around — over, and over, and over again — what they already had on the table.

Job Actions and Member Activities

As the months dragged on, the nurses spearheaded a number of job actions and member activities. There was a massive letter-writing campaign to the CNO, followed by the delivery of those letters (more than 700 of them!) directly to her office door. There was the mailing to members of a holiday card that included a "bah, humbug" message regarding management's bad behavior. There was a wildly successful online survey whose data was used to show management just how united the Tufts nurses were and how far they'd go for their patients and for a fair contract. There

Continued on page 6 —>





The greatest union organizers we ever had was this administration!!



were t-shirts, buttons, open meetings, and a closed Facebook group that was constantly red-hot with activity. And there was a hugely successful informational picket on April 12. Still, management refused to enhance its package even though the nurses kept offering thoughtful proposals that could seal the deal.

Which left the Tufts RNs with only one remaining option: to strike.

Strike

And so they did, and there was no shortage of support, solidarity, or news coverage when they started walking the line at 7 a.m. on Wednesday, July 12.

While the 300-plus replacement nurses that management hired were attempting to hold down the fort during the strike and subsequent four-day lockout, Washington Street was jam packed with an endless parade of committed Tufts RNs and their supporters. There were daily rallies, and each got underway with a powerful rallying cry from Tufts co-chairs Barbara Tiller and Mary Havlicek Cornacchia. Local legislators, including Boston Mayor Marty Walsh, Congressman Stephen Lynch, Congressman Mike Capuano; leaders from local unions and trades groups; and members of the clergy all joined in those rallies, and, in some instances, they arrived en masse ... like on Friday, July 14, when the Boston Building Trades Council encouraged locally-based members to use their lunch break to support the Tufts nurses. Hundreds upon hundreds of Building Trades members marched up Washington Street, holding signs and banners in support of the nurses and their fight. The streets were packed, and the city police stepped in to make sure that traffic avoided the burgeoning crowds.

It was one example, among many from those five days, of just how important the Tufts nurses' fight had become. It was no longer just about a contract, or the need for staffing improvements, or market-competitive wages, or pension protections. It was about fighting against corporate greed, and all the things that come with it: a splintered and struggling middle class, unsafe working conditions for employees in all sectors, a shrinking voice in the workplace, and general day-to-day fear of how to do the best you can — both personally and professionally — with less and less from the employer. Without knowing it, when the RNs walked out of the Medical Center at 7 a.m. on July 12, hard-working people everywhere identified with their struggle and were inspired by their determination, dedication, and passion for doing what is right.

The MNA nurses of Tufts Medical Center expect to hear from the federal mediator soon regarding when and where negotiations are to resume. But they are also expecting this: To be locking horns again with management. The next time they do, both the nurses and management will know well ahead of time that the public is, and always will be, with the nurses. ■

Leominster Hospital RNs Settle New Two-Year Contract



After just five negotiations sessions, the MNA bargaining committee at Health Alliance-owned Leominster Hospital settled a new two-year agreement. Highlights include:

- Improvements in health insurance for employees working 24-31 hours (from 50/50 percent split with the employer to a 60/40 percent split).
- Health Alliance (HA) insurance was a “company store,” self-insured plan requiring nurses to receive their care at the hospital or spend thousands in co-insurance to access Tier 2 and 3 hospitals, even if HA did not provide that service. All Tier 2 hospitals (UMASS and its affiliates) moved in to the Tier 1 in this contract, opening up choice and reducing out-of-pocket monies for over two-thirds of the bargaining unit.
- Won language that allows for RNs who have worked for 25 years to reduce their hours while still maintaining the same insurance benefits.
- No pre-scheduling of per diems, and a defined extra shift cancellation process that cancels per-diems prior to regular staff.
- Improvements to the workplace violence language that extends the time the hospital will pay nurses 100 percent of their salary if injured due to violence from three months to six months.
- Two percent across-the-board increase over two years. ■

Steward RNs Back at the Table



The MNA/Steward facilities that were part of the original limited master agreement that the MNA negotiated when Steward first entered the local health care arena in 2010 returned to the table this summer to start negotiating their next contract. Three sessions have been held so far, and in this photo the nurses are shown giving the “thumbs up” as a sign of support for their brothers and sisters at Tufts Medical Center.

Senate Version of “Elise’s Law” Unanimously Reported out of Public Safety/Homeland Security Committee

The husband and colleagues of Elise Wilson, the RN who was stabbed while working in the emergency department at Harrington Hospital in June, testified at a State House hearing on Wednesday, July 19 in favor of “Elise’s Law,” legislation proposed by the MNA that requires health care employers to develop and implement individualized workplace violence prevention plans.

The hearing was held before the Committee on Public Safety and Homeland Security. The bill, originally named “An Act Requiring Health Care Employers to Develop and Implement Programs to Prevent Workplace Violence” (S. 1374) was filed by former Sen. James Timilty, D-Walpole. An identical bill had been filed in the House (H.1007) by Rep. Denise Garlick, D-Needham. By the end of the day, the bill had been reported out favorably by the committee. It will now continue through the state’s legislative process on its way to becoming a law.

Wilson, 65, was assisting a patient on the morning of June 14 at the Southbridge hospital when, police say, he took out a knife and stabbed Wilson, causing her severe injuries that required surgery. Wilson is still recovering from the attack and was unable to attend the hearing for “Elise’s Law,” but her husband and several of her nurse colleagues were in attendance and read Wilson’s personal testimony in support of the legislation.

“The attack against Elise was vicious and left her fighting for her life,” said RN Tracy DiGregorio, who was working in the ER at the time of the assault. “Unfortunately, I cannot say violence against nurses is rare. Nurses and other health care professionals are assaulted every single day at hospitals throughout Massachusetts. We should pass ‘Elise’s Law’ right away to help stop the violence.”

“Workplace violence prevention must become the highest priority for any facility that employs healthcare workers,” said Clifton Wilson, Elise’s husband. “It’s utterly horrific and shocking that the mere act of going to work has become dangerous business for the people who take care of us when we are sick. Harrington Hospital has installed metal detectors at ER entrances. People entering are having their bags searched. Nurses and staff will have panic buttons installed on their ID badges. That’s truly what makes this Elise’s Law — not only that Elise was nearly killed on the job, but also that her hospital is putting safeguards in place so that this type of event might be prevented from happening to anyone else.”

Following the assault against Wilson, Harry Lemieux, vice president and chief information officer at Harrington Health-Care System, told the Worcester Telegram & Gazette that he was in support of the violence prevention legislation being proposed by the MNA and that Harrington Hospital had already begun instituting some prevention programs.

“It’s important for health-care organizations to protect their employees who are faced with these increasing incidents,” Lemieux told the newspaper.

Elise’s Law Needed to Prevent Escalating Violence

Nurses are assaulted on the job more than police officers and prison guards, with more than 70 percent of hospital emer-



RN Elise Wilson recovering from her wounds, grateful her ventilator and feeding tube have been removed.

gency department nurses reporting being assaulted during their career. Elise’s Law will require health care employers to perform an annual safety risk assessment and, based on those findings, develop and implement programs to minimize the danger of workplace violence to employees and patients.

The bill also provides time off for health care workers assaulted on the job to address legal issues (up to seven paid days off per calendar year), allows nurses to use their health care facility address instead of their home address to handle legal issues related to an assault, and requires semiannual reporting of assaults on health care employees to district attorneys.

Miko Nakagawa, an RN who was assaulted in January 2017 while working in the emergency department at Health Alliance Hospital Leominster, also testified at the hearing.

“The culture needs to change in health care,” Nakagawa said. “When violence is so widespread, it endangers not just staff but everyone at the hospital – patients and visitors included. This legislation will go a long way toward changing that culture and preventing violence. The more protection and support health care professionals have, the less violence there will be in health care.”

A recent Massachusetts Nurses Association survey of more than 220 union and non-union nurses found that more than 85 percent of nurses have been punched, spit on, groped, kicked or otherwise physically or verbally assaulted. Yet only 19 percent of nurses say their employer was supportive and tried to find solutions after they experienced violence. 76 percent said existing workplace violence policies are not enforced.

A 2015 report from the Centers for Disease Control (CDC) found that between 2012 and 2014 incidents of violence “nearly doubled for nurses and nurse assistants.” Violence against health care workers accounts for nearly as many injuries as in all other industries combined, according to the Occupational Health and Safety Administration.

Top public safety officials have joined the fight to prevent health care violence and endorsed the legislation, including Worcester County District Attorney Joseph Early and North-western District Attorney David Sullivan.

“I believe that law enforcement best serves our citizens when we are dedicated to crime prevention,” DA Early said. “To tackle health care violence in Massachusetts, we need to understand the full scope of the problem. This legislation will enable district attorneys across the commonwealth to track assaults in health care facilities and to work with nurses, other health care professionals and their advocates to limit violence and reduce harm.” ■

Massachusetts Nurses Association 2017 General Election Ballot

President, Labor, (vote for 1 for 3 years)

Donna Kelly-Williams

Secretary, Labor, (vote for 1 for 3 years)

Ellen Farley
Kirsten Maxfield

Director, Labor*, (vote for 5 for 3 years - one per Region)

Region One: **Donna Stern**
Region Two: **Ellen Smith**
Region Three: **P. Karen Duffy**
Region Four: **Kay Marshall**
Region Five: **Joan Ballantyne**

Director At-Large, Labor, (vote for 4 for 3 years)

Beth Amsler
Kirsten Maxfield
Colleen Wolfe

Director At-Large, General*, (vote for 3 for 3 years)

Michelle Cataldo
Seamus Whelan
Kirsten Maxfield
Susan Wright-Thomas

Labor Program Member who is a non-RN Health Care Professional (vote for 1 for 3 years)

Gloria Bardsley

Nominations Committee, (vote for 5 for 3 years - one per Region)

Kirsten Maxfield
Shannon Niles

Bylaws Committee, (vote for 5 for 3 years),

Kirsten Maxfield

At-Large Position in Regional Council (vote for 2 for 3 years)

Region One
Region Two
Tami Hale
Region Three
Joanne Kingsley
Cindy Dodge
Region Four
Elizabeth Collins
Region Five

NENA Delegate, Labor (vote for 9 for 2 years starting in 2018)

Beth Amsler
Joan Ballantyne
Karen Coughlin
Michael D'Intinosanto
Gary Kellenberger
Kay Marshall
Kirsten Maxfield
Ellen Smith
Betty Sparks
Lynne Starbard
Donna Stern

*General means an MNA member in good standing & does not have to be a member of the labor program. Labor means an MNA member in good standing who is also a labor program member. Labor Program Member means a non-RN Healthcare Professional who is a member in good standing of the labor program.

Bios of candidates for MNA office, 2017

President, Labor

Donna Kelly-Williams, RN, BA, MM, CPN

Arlington, MA

Employment: Cambridge Hospital

Education: Masters in Management in Healthcare Mgt, Cambridge College, 2009

Certificate, Harvard Law School Trade Union Program, 2009
BA, Labor Studies, University of Massachusetts Boston, 2007

ADN Lasell College, 1978

Present/Past MNA Activities: MNA President, MNA Vice President, Region 5 Vice President, Chair Cambridge Hospital

Candidate Statement: As a practicing registered nurse and full time staff nurse, I continue to be humbled by the trust and confidence patients and our communities have in our profession. We have a tremendous obligation to protect ourselves, our fellow nurses, healthcare professionals and the patients entrusted to our care every day. MNA's commitment to have a limit set on the number of patients a nurse would care for at one time, through legislation, contract negotiations and a ballot initiative has brought unprecedented recognition for the MNA's devotion to the care of all patients' in the commonwealth. Nurses across the state are in contentious negotiations with staffing, layoffs, retirement and healthcare benefits, and restructuring, and I have been there, attending membership meetings, walking picket lines, and meeting with state and local legislators to support all nurses and healthcare professionals across the state. I have also embraced the opportunity to travel to many states across the country representing MNA as unionized nurses have stood up for their rights, and with the MNA Board of Directors have created

Northeast Nurses Association (NENA) to further our unity and strength. I truly know what MNA members are experiencing across the state and am fully committed to continuing to serve, support, and promote all members of the Massachusetts Nurses Association, as it is the membership that is the strength and navigator for the future of the MNA. I respectfully ask for your vote to continue to be a strong presence, voice and activist for our patients, our profession, and the Massachusetts Nurses Association.

Secretary

Ellen Farley, RN-BC

Middleboro, MA

Employment: Taunton State Hospital

Education: AD, Bristol Community College, 1979

Present/Past MNA Activities: For over eighteen years I have been a dedicated MNA member serving on the following; Massachusetts Nurses Association (MNA) Board of Directors Secretary, Served as a Delegate for MA at the National Nurses United (NNU) Founding Convention. Attendee at Nurse Staff Assembly annually in Washington, DC, Unit 7 Executive Board Secretary for many years and now as Labor representative, Local Taunton State Hospital Secretary/Treasurer, MNA Center for Ethics and Human Rights, MNA Bylaws Committee, Region 3 Board of Directors Treasurer, MNA Stat Team, and Serve on FAST (First Aid Support Team). It is my honor to seek the seat of Secretary for the MNA Board of Directors.

Candidate Statement: I have been an active participant in MNA's campaigns to ensure safe staffing limits for all nurses, in all areas, and to protect staff

from assaults in the workplace. I was instrumental in the establishment of the "Safety for All" Committee at my hospital to evaluate workplace violence issues, identify behaviors and triggers that can lead to assaultive behaviors, and recommend hospital wide measures to reduce assaults on staff. I have testified at several legislative hearing and forums, including meeting with District Attorneys, to help educated elected officials about the importance of dealing with the issue of Workplace Violence and establishing safe patient limits.

Being unified, well organized, and having the ability to see the big picture for the future of staff nursing is important. As healthcare providers we are the most trusted professionals and therefore are the best advocates for our patients.

Kirsten Maxfield, RN

Winchendon, MA

Employment: UMass University

Education: Ma-Dept of Public Health-SANE RN, SANE RN Sexual Assault Examiner, 2013

Mt Wachusett College, Nsg, 2006
GLRVTS, Nsg, 1992

Director, Labor

Region 1

Donna Stern, RN, MSN

Hadley, MA

Employment: BFMC

Education: UMass Amherst, BSN, 2005

Boston College, 2002

U of Maine, BS, 1992

Present/Past MNA Activities: Co-chair of BFMC (Jr+currently Senior), BOD member

Region 2

Ellen Smith, RN

Worcester, MA

Employment: UMass Memorial-University

Education: Cape Cod Community College, ADN, 1994

Present/Past MNA Activities: NENA-President, MNA BOD-state, Vice Chair-Region 2, Co-chair UMass-University

Region 3

P. Karen Duffy, RN-OB, BSN

Marshfield, MA

Employment: Brockton Hospital

Education: Stonehill College, BSN, 1988

Massasoit Community College, RN, 1984

Present/Past MNA Activities: Board of Directors, Vice President Region 3, PAC, STAT Team, Brockton Hospital bargaining Committee

Candidate Statement: I DON'T LIKE CHANGE BEING MADE FOR ME. I LIKE BEING PART OF THE CHANGE. This is why I chose to be involved with the union. A nurse cannot sit back and let someone else make decisions for them about their nursing practice. I see our nursing profession being taken over by for profit corporations. The Lean mentality is changing our profession with nurses not only doing their jobs with less staff but having to incorporate ancillary staff job duties as well. The process for needed change is starting with the campaign for a ballot question for safe patient limits in the November 2018 election.

It's a much needed law that will change our practice. I plan to be there every step of the way to get this passed from door knocking, signature collection, and sign holding on the street corners. This is our union come join me. You and me will be an integral part of getting the ballot initiative passed. Nursing has to change to stop the burn out. It's time to create our own path forward. It's our hospital, our union, and our profession. Let's own it and join me to create our own patient limits law.

Region 4

Kathleen "Kay" Marshall, RN

Hampton, NH

Employment: Anna Jaques Hospital

Education: Columbia Presbyterian Hospital/Mt. St Vincents, 1980

Edna McCowell Clark School of practical Nursing, 1977
North Andover High School, 1973

Present/Past MNA Activities: BOD, Nomination Committee, Regional Council 4

Region 5

Joan Ballantyne, RN

Mansfield, MA

Employment: Steward Norwood Hospital

Education: Greater Glasgow School of Nursing, RMN, 1982

Greater Glasgow School of Nursing, RGN, 1980

Present/Past MNA Activities: Board of Directors, Delegate for NENA, Finance Committee, Chair of Region 5 Council

Director At-Large General

Michelle Cataldo, RN, BSN

Winthrop, MA

Employment: Epidermis Anti Aging Center

Education: Northeastern University, Psych NP, 2019
Chamberlain College of Nursing, BSN, 2016

Bunkerhill Community College, Associate in Nursing, 2015

Present/Past MNA Activities: Previous to my Nursing career, I had a strong Labor background while working for the airlines. I was a Shop Steward for Teamsters, Local 25, where, among other organizational efforts, I successfully arbitrated a "win" to return a deserving employee back to work. Presently, I work as an Aesthetic Nurse which allows me a certain amount of autonomy within the medical community. This field of Aesthetic Nursing, however, is becoming a very desired specialty and is now under attack from the medical profession who is encouraging and sponsoring legislation to try to change the "term of surgery" under the nursing scope so that nurses will not be permitted to practice Aesthetic nursing. I strongly feel that these attempts being made by physicians are economically driven. In other words, as plastic surgery has become less desirable for the consumer and other anti-aging procedures have gained in popularity, physicians want to cut into our piece of the pie. Since an onslaught of legislative bills beginning in 2006, I have been diligent in organizing my fellow Aesthetic nurses to be present at the State House representing our right to continue providing the services covered by the scope of our licenses and continue our autonomy as Aesthetic Nurses.

As an "At Large" member, I would be a significant asset to the Board of Directors. My experience in rallying individuals would insure that younger nurses join the MNA. Greater numbers translate into greater strength in protecting Nurses' rights.

Kirsten Maxfield, RN

Winchendon, MA

Employment: UMass University

Education: Ma-Dept of Public Health-SANE RN, SANE RN Sexual Assault Examiner, 2013

Mt Wachusett College, Nsg, 2006

GLRVTS, Nsg, 1992

Seamus Whelan, RN, BSN

West Roxbury, MA

Employment: Cambridge Health Alliance

Education: UMass Boston, BSN, 2002

Somerville Hospital School for Nursing, Nursing Diploma, 1997

Candidate Statement: Today our nursing profession faces some of its greatest and most serious challenges. As we collectively struggle through our MNA union to protect our nursing practice and to ensure our ability to provide safe, quality patient-care we need strong and determined leadership. The corporate control and domination of our healthcare system and the frightening proposed changes being pushed by the Trump administration will certainly

cause even more unnecessary suffering and needless loss of lives. It is also clear that whatever deal is finally agreed on by our politicians, most of our big business funded elected officials are in agreement, that the need of corporations to make profits from healthcare should be placed before what is best for our patients. I will continue to support and strengthen MNA's efforts to win real change by fighting for safe staffing ratios and by linking this struggle to the need to win Medicare For All. Only a single payer system can provide real solutions to the broken, wasteful and fragmented healthcare delivery system we currently endure. Growing support that is now emerging and if properly organized can bring the fundamental change we need. Nurses can provide the missing leadership we need to achieve this.

Susan Wright Thomas, RNC

Hull, MA

Employment: Cambridge Hospital/Simmons College

Education: Worcester State University, MSN, 2013
Brockton Hospital School of Nursing, Diploma, 1993

Present/Past MNA Activities: BOD, Chair, Awards

Candidate Statement: I am running for re-election to the MNA Board of Directors because I value the opportunity to continue as a leader in the professional organization and union that has made the most difference in my ability to practice effectively and safely in Nursing, the vocation I share with most of you. Now as much as ever we need to work with each other and our patients to establish safe patient limits. While I understand and respect the concerns of those who question the BOD's past decisions and strategies, I reaffirm my votes to accept an incremental approach to patient limits. I still think it was the right thing for that time. I am just as confident that an all-out fight at the ballot is the right stand today. I believe that the lessons we have learned in our earlier efforts will help us to craft and pass the best legislation to enact and enforce safe patient limits now.

I am equally committed to the MNA and NENA agenda to forward social and economic justice, to realize healthcare as a right for all, and to join with our brothers and sisters to establish the renewal of the union movement that has consistently brought us progress in our society. I honor Nursing's social contract and am grateful that MNA has provided the framework for me to exercise that conviction.

I commit myself to listening to you and taking responsibility for my decisions on your behalf. I will continue to share in our mission whatever your decision. I ask for your confirmation and your vote.

Director At-Large Labor

Beth Amsler, RN

Ashland, MA

Employment: Newton-Wellesley Hospital

Education: The Jewish Hospital School of Nursing, Diploma, 1969

Present/Past MNA Activities: MNA BOD 2013-present, 2008-2012, MNA PAC 2004-present, Treasurer, 2017, Congress on Nursing Practice 2000-2009, 2015-present, Vice Chair ewton-Wellsley Bargaining Committee 2011-2013

Kirsten Maxfield, RN

Winchendon, MA

Employment: UMass University

Education: Ma-Dept of Public Health-SANE RN, SANE RN Sexual Assault Examiner, 2013

Mt Wachusett College, Nsg, 2006

GLRVTS, Nsg, 1992

Colleen Wolfe, RN

Charlton, MA

Employment: UMass Memorial

Education: Quinsigamond Community College, ADN, 1995

Present/Past MNA Activities: BOD Director at Large, Co-chair UMass Memorial Hahnemann

Labor Program

Gloria Bardsley, Occupational Therapist

North Grafton, MA

Employment: Department of Developmental Service

Education: Worcester State University, Bachelors Occupational Therapy, 1998

Present/Past MNA Activities: Board of Directors, U& Executive Board

Candidate Statement: My name is Gloria Bardsley and I work as an Occupational Therapist for the Department of Developmental Services. I am seeking re-election to the Board of Directors for the Labor Program seat. I have been an MNA member in good standing for the past 19 years. I believe it's important for all disciplines to be represented and heard. I take pride in my advocacy for both the nursing and non-nursing disciplines. If elected, I pledge to work on behalf of all members throughout our association and will support policies that will provide safe quality patient care. I respectfully request your vote. Thank you.

Nominations Committee

Shannon Niles, RN

Hyde Park, MA

Employment: Norwood Hospital

Education: Laboure College, BSN, 2018
Laboure College, Nursing Science, 2014

Candidate Statement: I see nursing as the promotion, protection and optimization of health, preventing illness and injury, facilitating healing, alleviation of suffering through the diagnosis and treatment of human response and most importantly the advocacy in the care of individuals and their families. Some of the issues I see in nursing are the unsafe staffing ratios, lack of axially staff, violence in the work place, retention issues in community hospital for younger staff, lack of in-house education opportunities, and lack of diversity in some area hospitals.

If I were elected, my major contribution would be diversity and trying to create new ways to engage education opportunities to staff nurses. I would also love to see more hospital and school partnerships and incentives for education advancements.

Kirsten Maxfield, RN

Winchendon, MA

Employment: UMass University

Education: Ma-Dept of Public Health-SANE RN, SANE RN Sexual Assault Examiner, 2013

Mt Wachusett College, Nsg, 2006

GLRVTS, Nsg, 1992

Bylaws Committee

Kirsten Maxfield, RN

Winchendon, MA

Employment: UMass University

Education: Ma-Dept of Public Health-SANE RN, SANE RN Sexual Assault Examiner, 2013

Mt Wachusett College, Nsg, 2006

GLRVTS, Nsg, 1992

At-Large Regional Council

Region 2

Tami Hale, BSN, RN, NCSN

Worcester, MA

Employment: City of Worcester

Education: Regis University, Bachelors in Nursing, 2010

Quinsigamond Community College, Associate in Nursing, 2000

Present/Past MNA Activities: Region 2 At-large

Region 3

Cindy Dodge, RN

Yarmouthport, MA

Employment: VNA Cape Cod

Education: SUNY College of Technology, BPS, 1985
Fulton-Montgomery, AAS Nursing, 1973

Present/Past MNA Activities: Vice chair-Cape Cd VNA unit

Candidate Statement: I have been a nurse for 44 years. I have worked in acute care, long term care and presently am employed in home care for the past 19 years. I have worked in other union environments both as a union member and as a member of management therefore having an understanding of issues from both sides.

I strongly feel there should be equal health care for all across the country and am therefore fearful of the new proposals from the federal government. I feel nurses are in a unique position to advocate for health care as we have a greater understanding of issues and requirements needed to provide the best affordable care for all.

I would support and work toward our common goals as identified by the organization, most recently the safe staffing levels for all hospital units. Our patients can only receive the best and safest care when our nurses have limits on their assignments. If the patients receive the proper care in our hospitals and

our rehab facilities then they are better prepared and more stable for home care hopefully resulting in reduced hospital re-admissions and improved outcomes for our patients.

Joanne Kingsley, RN, BSN, MM

Duxbury, MA

Employment: Signature Healthcare Brockton

Education: Cambridge College, MM, 2008

Curry College, BSN, 2006

Brockton Hospital School of Nursing, Diploma, 1978

Present/Past MNA Activities: Bargaining Unit Co-chair, Member-Brockton Hospital Rep

Candidate Statement: Nurses have the opportunity to make a strong impact on the healthcare of individuals and improvements in the education of healthcare delivery in the communities that we serve. Politically, we challenge the ability to maintain the safety of patients in a safe environment with an appropriate amount of staffing through legislation. Maintaining standards of healthcare for all individuals with various diagnoses is pertinent.

Awareness of mental health issues, rising addiction crisis, and environmental health issue standards in our communities locally is an area nursing makes an impact. The ongoing changing environment of availability of healthcare and the cost to obtain coverage is concerning. It is concerning the difficulties that the elderly, mentally challenged, developmentally delayed children and adults face when attempting to receive affordable healthcare.

Nursing is a respected profession known for the care of individuals and avocation for patient safety. If elected, I would continue to work with others to promote the values of nursing for the care of individuals for optimum health.

Region 4

Elizabeth Collins, RN

Topsfield, MA

Employment: Lahey/Northeast

Education: Emmanuel College, BA, 1981

Peter Bent Brigham Hospital, Diploma, 1976

Present/Past MNA Activities: RC 4 Council, At-large

Nena Delegate, Labor

Beth Amsler, RN

Ashland, MA

Employment: Newton-Wellesley Hospital

Education: The Jewish Hospital School of Nursing, Diploma, 1969

Present/Past MNA Activities: MNA BOD 2013-present, 2008-2012, MNA PAC 2004-present, Treasurer, 2017, Congress on Nursing Practice 2000-2009, 2015-present, Vice Chair Newton-Wellesley Bargaining Committee 2011-2013

Joan Ballantyne, RN

Mansfield, MA

Employment: Steward Norwood Hospital

Education: Greater Glasrow School of Nursing, RMN, 1982

Greater Glasrow School of Nursing, RGN, 1980

Present/Past MNA Activities: Board of Directors, Delegate for NENA, Finance Committee, Chair of Region 5 Council

Karen Coughlin, RN, BC

Mansfield, MA

Employment: Department of Mental Health-Taunton State Hospital

Present/Past MNA Activities: MNA Board of Directors: Vice President, Executive Vice Chair Unit 7 Executive Board, Chair Taunton State Hospital, MNA PAC, MNA Stat Team, MNA Finance Committee, Greater Boston Labor Council-Executive Board, MNA Labor Education Task Force, MNA Workplace Task Force

Michael D'Intinosanto, RN

Winchendon, MA

Employment: DDS/TCS

Education: Harvard Trade Union Program, Executive Certificate, 2010

Fitchburg State College, BSN, 1999

LaBoure Jr College, ADN, 1984

Present/Past MNA Activities: MNA BOD, Unit 7 President

Gary Kellenberger, RN

Blackstone, MA

Employment: Worcester Recovery Center & Hospital

Education: Quinsigamond Community College

Present/Past MNA Activities: Board of Director, finance Committee, Region 2 Treasurer

Kathleen "Kay" Marshall, RN

Hampton, NH

Employment: Anna Jaques Hospital

Education: Columbia Presbyterian Hospital/Mt. St Vincents, 1980

Edna McCowell Clark School of practical Nursing, 1977
North Andover High School, 1973

Present/Past MNA Activities: BOD, Nomination Committee, Regional Council 4

Kirsten Maxfield, RN

Winchendon, MA

Employment: UMass University

Education: Ma-Dept of Public Health-SANE RN, SANE RN Sexual Assault Examiner, 2013

Mt Wachusett College, Nsg, 2006

GLRVTS, Nsg, 1992

Ellen Smith, RN

Worcester, MA

Employment: UMass Memorial-University

Education: Cape Cod Community College, ADN, 1994

Present/Past MNA Activities: NENA-President, MNA BOD-state, Vice Chair-Region 2, Co-chair UMass-University

Betty Sparks, RN, ADN, CNOR

Norwood, MA

Employment: Newton Wellesley Hospital 2000-present, member of MA2 Disaster Medical Assistant Team 2002-present, Faulkner Hospital 1977-2000

Education: H.O. Peabody Vocational School LPN 1974-1975. Massasoit Community College ADN 1991

Present/Past MNA Activities: BOD, Vice Chair MNA PAC, Emergency Preparedness Chair, Convention committee, bylaws and policy committees, Faulkner and NWH nursing/bargaining committee; NENA and NNU delegate

Candidate Statement: I am running for Director At-Large on the MNA Board of Directors. I feel we as nurses need a voice in the many changes that are accruing in the health field today. With all the corporate takeovers, speed-up, and new technology making major changes in the way we provide patient care, we are the voices crying out for SAFE patient care. Why are our voices the only ones?? Because we ARE the only ones who really know what is happening way down at the bedside/homecare settings. We have to make sure that our nursing practice is not compromised, because when our practice is compromised so are our patients' lives. I am asking for your vote, and I assure you that I am paying attention and speaking up for our patients and all of us! Thank-you, Betty Sparks RN

Lynne Starbard, RN

Worcester, MA

Employment: UMass Memorial-Memorial

Education: Quinsigamond Community College, AS, 1977

Anna Maria College

Present/Past MNA Activities: BOD Director Region 2, Co-Chair Memorial, Chair Region 2, VP Exec AFL Central MA

Donna Stern, RN, MSN

Hadley, MA

Employment: BFMC

Education: UMass Amherst, BSN, 2005

Boston College, 2002

U of Maine, BS, 1992

Present/Past MNA Activities: Co-chair of BFMC (Jr+currently Senior), BOD member

Homophobia is a Public Health Issue

Written by Edith Brous, Esq. PC, and reprinted with her permission

A 2008 article in the American Journal of Public Health noted that, "As with any minority population, the optimal provision of health care and prevention services to sexual and gender minorities requires providers to be sensitive to historical stigmatization, to be informed about continued barriers to care and the differential prevalence of specific risk factors and health conditions in these populations, and to become aware of the cultural aspects of their interactions with LGBT patients." <http://bit.ly/2uCA44g>

A decade later, continuing and dangerous health care disparities illustrate the need for education of health care professionals (HCPs) regarding this community. Many cultural competency courses address racial, ethnic, and religious belief systems but ignore the Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual (LGBTQIA) population. The consequence is unnecessary rates of psychiatric disorders, depression, substance use disorders, and suicide. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3657897/>. The aftermath to real human beings of HCP intolerance is homelessness, higher infection rates, and compromised access to preventive care, poverty, exploitation, bullying and

violence. <https://www.healthypeople.gov/2020/topics-objectives/topic/lesbian-gay-bisexual-and-transgender-health>

It always saddens me and makes me angry to see otherwise intelligent and educated professionals remain unknowingly ignorant or overtly bigoted as to the public health implications of stigmatizing certain populations. Regardless of one's personal, religious, or political views, all health care professionals should care about disease transmission & progression, population health, and human suffering. Ethical practice requires professionals to recognize their own biases to improve the health care of all patients. <https://www.lgbthealtheducation.org/wp-content/uploads/Improving-the-Health-of-LGBT-People.pdf>

The National LGBT Cancer Network provides useful tools for inclusive cultural competence training <http://cancer-network.org/programs/cultural-competency-training/> Intolerance can take many forms. Liz Margolies, the founder and executive director of the National LGBT Cancer Network, has produced a brilliant short film demonstrating the subtle messages we send as providers. Watch Vanessa Goes to the Doctor & be entertained as well as educated: <http://bit.ly/2tdfRPm>. ■

Proposed MNA Bylaw Amendments

The MNA Bylaws Committee proposes the following bylaw amendments for discussion at MNA's convention on October 12, 2017. Members should review these prior to the discussion and vote scheduled to take place during the annual business meeting at convention on October 12, 2017 at the Sheraton Framingham Hotel and Conference Center, Framingham, MA.

Please Note: Language which is struck through is language proposed to be removed from the MNA bylaws; language underlined is proposed to be added to the MNA bylaws.

Article	Current	Proposed	Impact
Article III – Regional Councils	Section 5: Governance a. The governing body within each region will consist of: (2) One Unit 7 representative on each regional council, to be designated by the Unit 7 President.	Section 5: Governance a. The governing body within each region will consist of: (2) One Unit 7 representative on each regional council, to be designated <u>appointed</u> by the Unit 7 President <u>Executive Board</u> .	To comply with current practice. Proposed by MNA Board of Directors.

Article	Current	Proposed	Impact
II, Membership, Privileges, and Dues Section 7: Dues	Section 7: Dues a. The MNA and regional annual dues shall be determined by a majority of those members voting in a secret mail ballot. The membership must be notified in writing of any proposed change in dues at least 30 days prior to the meeting. (1) The annual dues for an MNA Member and an MNA Associate Member shall cover a 12-month period from the time of enrollment. (2) Lapse of dues payments by MNA Members and Associate Members shall be cause for immediate cessation of MNA membership. (3) MNA and regional council dues will be paid by the MNA for members who have held membership in the MNA for 40 or more years.	Section 7: Dues b. The MNA and regional annual dues shall be determined by a majority of those members voting in a secret mail ballot. The membership must be notified in writing of any proposed change in dues at least 30 days prior to the meeting. (1) The annual dues for an MNA Member and an MNA Associate Member shall cover a 12-month period from the time of enrollment. (2) Lapse of dues payments by MNA Members and Associate Members shall be cause for immediate cessation of MNA membership. (3) MNA and regional council dues will be paid by the MNA for members who have held membership in the MNA for 40 or more years. Add (4) <u>MNA and regional council dues will be paid by the MNA for members actively serving as Chairs or Co-Chairs of the MNA bargaining units.</u>	Based on the Chairs and Co-Chairs listed for all the bargaining units, the cost of this amendment in fiscal year 2018 will be approximately \$193,700. In subsequent years, changes in dues based on contract settlements and step raises will impact the annual costs. It is anticipated that MNA will do monthly, rather than annual, calculation of the dues of individual Chairs and Co-Chairs.

Notice to members and non-members regarding MNA agency fee status In private employment under the National Labor Relations Act

This notice contains important information relating to your membership or agency fee status. Please read it carefully.

Section 7 of the National Labor Relations Act gives employees these rights:

- To organize
- To form, join or assist any union
- To bargain collectively through representatives of their choice
- To act together for other mutual aid or protection
- To choose not to engage in any of these protected activities

You have the right under Section 7 to decide for yourself whether to be a member of MNA. If you choose not to be a member, you may still be required to pay an agency fee to cover the cost of MNA's efforts on your behalf. If you choose to pay an agency fee rather than membership dues, you are not entitled to attend union meetings; you cannot vote on ratification of contracts or other agreements between the employer and the union; you will not have a voice in union elections or other internal affairs of the union and you will not enjoy "members only" benefits.

Section 8(a)(3) of the National Labor Relations Act provides, in pertinent part:

It shall be an unfair labor practice for an employer –

- (3) by discrimination in regard to hire or tenure of employment or any term or condition of employment to encourage or discourage membership in any labor organization: Provided, that nothing in this Act, or in any other statute of the United States, shall preclude an employer from making an agreement with a labor organization ... to require as a condition of employment membership therein on or after the thirtieth day following the beginning of such employment or the effective date of such agreement, whichever is the later. If such labor organization is the representative of the employees as provided in Section 9(a), in the appropriate collective bargaining unit covered by such agreement when made...

Under Section 8(a)(3), payment of membership dues or an agency fee can lawfully be made a condition of your employment under a "union security" clause. If you fail to make such payment, MNA may lawfully require your employer to terminate you.

This year, the agency fee payable by non-members is 95 percent of the regular MNA

membership dues for chargeable expenditures. Non-members are not charged for expenses, if any, which are paid from dues which support or contribute to political organizations or candidates; voter registration or get-out-the-vote campaigns; support for ideological causes not germane to the collective bargaining work of the union; and certain lobbying efforts. MNA has established the following procedure for non-members who wish to exercise their right to object to the accounting of chargeable expenditures:

1. When to object

Employees covered by an MNA union security clause will receive this notice of their rights annually in the *MassNurse*. If an employee wishes to object to MNA's designation of chargeable expenses, he or she must do so within 30 days of receipt of this notice. Receipt shall be presumed to have occurred no later than three days after the notice is mailed to the employee's address as shown in MNA's records.

Employees who newly become subject to a contractual union security clause after September 1, or who otherwise do not receive this notice, must file any objection within 30 days after receipt of notice of their rights.

MNA members are responsible for full membership dues and may not object under this procedure. MNA members who resign their membership after September 1 must object, if at all, within 30 days of the postmark or receipt by MNA of their individual resignation, whichever is earlier.

Objections must be renewed each year by filing an objection during the appropriate period. The same procedure applies to initial objections and to renewed objections.

2. How to object

Objections must be received at the following address within the 30-day period set forth above:

Massachusetts Nurses Association
Fee Objections
340 Turnpike Street
Canton, MA 02021

Objections not sent or delivered to the above address are void.

To be valid, objections must contain the following information:

- The objector's name
- The objector's address
- The name of the objector's employer
- The non-member's employee identifica-

tion number

- Objections must also be signed by the objector

Objections will be processed as they are received. All non-members who file a valid objection shall receive a detailed report containing an accounting and explanation of the agency fee. Depending on available information, the accounting and explanation may use the previous year's information.

3. How to challenge MNA's accounting

If a non-member is not satisfied that the agency fee is solely for chargeable activities, he or she may file a challenge to MNA's accounting. Such a challenge must be filed within 30 days of receipt of MNA's accounting. Receipt shall be presumed to have occurred no later than three days after the notice is mailed to the employee's address as shown in MNA's records.

Challenges must be specific, and must be made in writing. Challenges must be received by MNA at the same address listed above in section 2 within the 30-day period to be valid. Challenges not sent or delivered to that address are void.

Valid challenges, if any, will be submitted jointly to an impartial arbitrator appointed by the American Arbitration Association. MNA will bear the cost of such a consolidated arbitration; challengers are responsible for their other costs, such as their travel expenses, lost time, and legal expenses, if any. Specifically challenged portions of the agency fee may be placed in escrow during the resolution of a challenge. MNA may, at its option, waive an objector's agency fee rather than provide an accounting or process a challenge. ■

Notice of Dues Increase to Members

This notice is to inform all MNA members and Agency Fee payers that per MNA dues policy the maximum and minimum rates of dues have been reviewed for adjustment. Based on this review effective July 1, 2017, the new minimum monthly dues rate will be \$69.42. The maximum monthly dues rate will be \$87.90. All associated dues categories or fees will be adjusted based on these new rates. For more information, contact the MNA's Division of Member Services at 781-821-4625 or send email to membership@mna.org.

Immediate Actions You Should Take to Protect Yourself Following a Work-Related Injury



Attorney Charles Donoghue, and Chris Pontus from the MNA's health and safety division, have been teaching workers' compensation and OSHA standards and requirements for health care workers within the MNA's labor school for more than ten years. Both Charlie and Chris have seen a systematic persistent and determined cutting of benefits allowed for workers who have injured themselves due to accidents, assaults, and some types of environmental exposures. Twenty years ago, nurses were treated with great deference when injured at work. Given their professional standing in the medical community, dedication and commitment to their patients and willingness to perform their duties even with a nagging injury, employers were never concerned about a potential workers' compensation claim.

Over the course of the ensuing years that dynamic has changed dramatically with more and more nurses coming to understand that even though the profession continues to represent the single most important link between a patient's successful treatment and speedy recovery, they have become just a number to their employers. While safe staffing has become the hallmark of the MNA's fight for its membership and more importantly the patients they treat, those who monitor the economics of the daily operation of a medical facility have chosen to unfairly target the professional nursing staff. Dealing with a potential workers' compensation claim, vigilance and the prompt reporting of any injury is a nurse's best friend.

Today it is critical that any injury suffered at work, no matter how minor it may seem at the time, be reported to the individual designated by the facility to accept that information. The days of working through a back, shoulder or lower extremity pain or any other type of injury and not reporting that incident are long since passed. The failure to report to the emergency room, occupational health or your own medical provider after suffering an injury could work against you if you eventually miss time from work. The failure to promptly report a work injury or to seek medical attention will become a red flag in a subsequent claim, with the insurer for the hospital and/or the occupational health department or human resources using those omissions as a baseline defense, questioning the validity of a claim. Document, document, document: it is important that a summary of the facts surrounding the actual happening of the injury, a notation addressing exactly where and when it occurred and identifying any

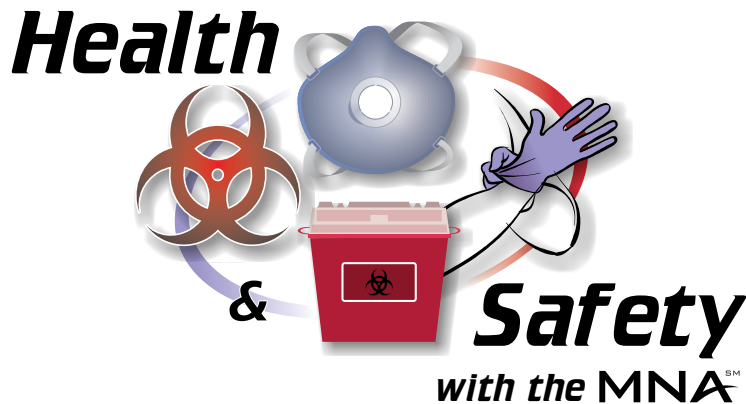
witnesses, along with the name of manager the injury was reported to, be prepared as soon as reasonably possible. In addition, requesting and retaining a copy of any and all treatment notes, tests or occupational health examination reports will prove invaluable if and when a claim must be filed.

Nurses are people of action, responding to emergencies in a calm and deliberate manner, expecting that an intended outcome will result. The litigation process and the potential of becoming involved in a prolonged worker's compensation case runs counter to the training and experience of a professional nurse. The ultimate goal of an injured worker is to utilize every possible tool available to ensure that your legal rights are protected and more importantly that your health and ability to perform your duties are not placed in jeopardy. It is sad to say, but in most cases, your employer is more concerned with the economic impact a workers' compensation claim will have on the bottom line.

If you have difficulty submitting a workers' compensation claim with your employer, we strongly suggest calling a workers' compensation attorney who does practice in this type of law. Following the above suggestions will allow you to become your strongest advocate if and when you are faced with a work injury.

If you have any questions or concerns you can email or call Chris Pontus and/or Charles Donoghue. Chris can be reached at cpontus@mnarn.org or called at 781-830-5754. Attorney Charles Donoghue can be reached at chasjd4@aol.com or called at 617-901-8860. ■





CONTINUING EDUCATION ONLINE

www.massnurses.org

Click on **MNA CE ONLINE** on the home page under **Professional Development**.

Recognizing and Supporting a Nurse Colleague with Impaired Practice

This program will discuss the important issue of narcotic diversion. Diversion prevalence, recognition, and methods for prevention will be explored. The best practice standards for safe handling of narcotics will be presented. The program will conclude with information on resources to support a nurse with a substance use problem as well as the nurses' role in safeguarding patient care. Contact hours for this activity will be awarded until *January 1, 2018*.

Accepting, Rejecting and Delegating a Work Assignment

The purpose of this activity is to provide a framework for decision-making based on the Massachusetts Nurse Practice Act and other regulatory agencies to safeguard patient care. Contact hours will be awarded until *March 31, 2018*.

Program Requirements

To successfully complete a program and receive contact hours, you must read the entire program, take and pass the Post-Test and complete the Program Evaluation. To pass the Post-Test, you must achieve a score of 80% or above. Your certificate of completion will be available immediately, from the "My Account Page," upon successful completion of the program.

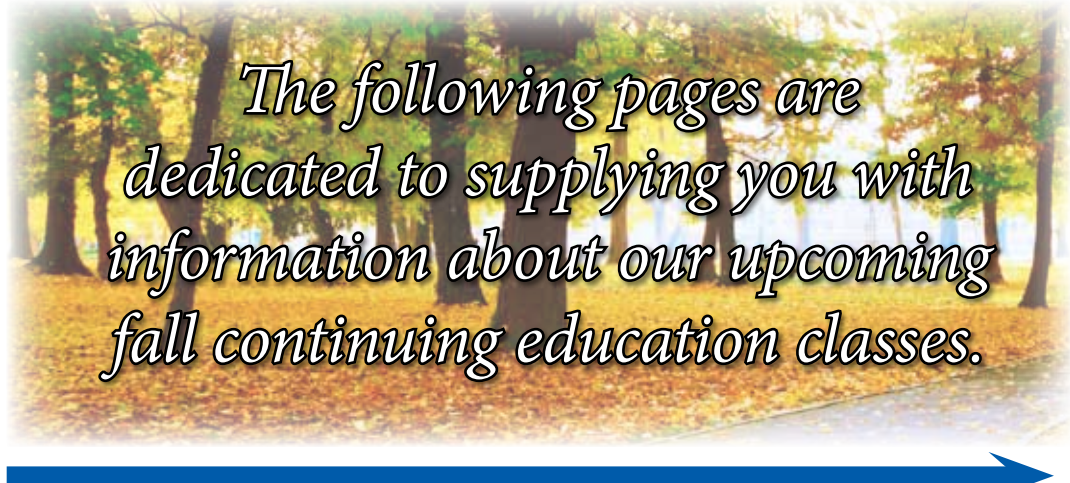
Accreditation

The Massachusetts Nurses Association is accredited with distinction as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

All programs are free of charge to MNA members only.

Contact Hours

Contact hours will be awarded by the Massachusetts Nurses Association.





Psychiatric Competencies for the Non-Psych RN

Description: This program will provide nurses with information regarding the nursing management of mental health issues impacting hospitalized patients in a non-psychiatric setting. Clinical presentation and nursing interventions of a variety of mental health disorders and relevant regulations, communication strategies and assessment tools will be discussed with case study review.

Presenter: Martha Carville Patch, DNP, PMHNP-BC, CCM

Date: October 4, 2017

Time: 5 - 5:30 p.m., Registration/Dinner
5:30 - 7:30 p.m., Program

Location: Log Cabin, 500 Easthampton Road, Holyoke; 413-535-5077; www.logcabin-delaney.com

Fee (by check only): Member/Associate Member, free*; Non-member, \$95.

*Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact hours: Will be provided.

Optimizing Home Safety for Persons with Progressive Memory Loss

Description: Alzheimer's disease is a progressive and global brain disease that poses numerous challenges for the person affected by the illness and their care providers. Keeping the person safe through proactive planning and adaption of the home environment will allow individuals and family members to assume control over potential problems so that they do not evolve into actual emergencies. This program will utilize lecture, case study and video presentations to inform the learner about successful strategies to anticipate and avoid safety hazards in homes where an individual is living with a progressive memory loss illness.

Presenter: Judith Parè, PhD, RN

Date: November 15, 2017

Time: 5 - 5:30 p.m., Registration/Dinner
5:30 - 8 p.m., Program

Location: Zucchini's Restaurant, 1331 North Street, Pittsfield, MA; www.zuchinisrestaurant.com

Fee (by check only): Member/Associate Member, free*; Non-member, \$95.

*Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact hours: Will be provided.

Morning Session: Domestic and Sexual Violence Training:

What Nurses Should Know

Description: This presentation will look at the dynamics of domestic and sexual violence, the health impact of violence and abuse, and the consequence of children's exposure to violence. The role of the nurse will be explored to include trauma-informed care.

Presenter: Erin Miller, MPS, MDV, CTSS, CASAC-T

Date: December 6, 2017

Time: 8-8:30 a.m., Registration
8:30 a.m.-11:45 a.m., Program

Afternoon Session: Best Practices for Nurses: Assessment, Implementation and Evaluation for Pain Management Strategies in the Face of the Opioid Crisis

Description: This program will look at what nurses can do to advocate for those patients who need prescribed pain medication within the context of the restrictions relating to the barriers of sufficient pain management within the current healthcare delivery system.

Presenter: TBA

Time: 11:45 a.m.-12:30 p.m., Lunch and Afternoon Registration
12:30-3:45 p.m., Program

Location: Log Cabin, 500 Easthampton Road, Holyoke; 413-535-5077; www.logcabin-delaney.com

Fee (by check only): Member/Associate Member, free*; Non-member,

\$195. *Requires a \$50 placeholder fee which will be returned upon attendance at program.

Contact hours: Will be provided.

To register: complete the Regional Registration Form located on page 6 and submit it to the MNA Region 1 Office, 241 King Street, Suite 226, Northampton, MA 01060. For questions, please contact Region 1 at 413-584-4607 or email region1@mnam.org.

Abortion: Information for Nurses

Description: The purpose of this presentation and discussion is to enable the nurse to describe the demographics of abortion in the U.S., new laws, regulations, and the courts, changes in family planning options, successes in reducing unplanned pregnancy, and the role of the nurse.

Presenter: Janet Singer, CNM

Date: September 25, 2017 (Please note: This is a Monday)

Time: 5:30 - 6 p.m., Registration/Dinner
6 - 8 p.m., Program

Location: Beechwood Hotel, 363 Plantation Street, Worcester; 508-754-5789; www.beechwoodhotel.com

Fee (by check only): Member/Associate Member, free*; Non-member, \$95. *Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact hours: Will be provided.

Domestic and Sexual Violence Training:

What Nurses Should Know

Description: This presentation will look at the dynamics of domestic and sexual violence, the health impact of violence and abuse, and the consequence of children's exposure to violence. The role of the nurse will be explored to include trauma-informed care.

Presenter: Erin Miller, MPS, MDV, CTSS, CASAC-T

Date: November 14, 2017 (Please note: This is a Tuesday)

Time: 5:30 - 6 p.m., Registration/Dinner
6 - 9 p.m., Program

Location: Doubletree Hilton, 5400 Computer Drive, Westborough (at 495); 508-366-5511, www.bostonwestborough.doubletree3.hilton.com

Fee (by check only): Member/Associate Member, free*; Non-member, \$95. *Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact hours: Will be provided.

Human Trafficking:

The Nursing Implications of Trauma and Survival

Description: Nurses and others who encounter victims of human trafficking often do not recognize it and opportunities to intervene are lost. This program will provide nurses with information to understand the phenomenon and the related health risks of human trafficking, to identify indicators and recognize signs that an individual is being trafficked, how to safely intervene and provide resources for nurses.

Presenter: Donna Sabella, PhD, M.Ed, MSN, RN, PMHNP-BC

Date: December 6, 2017 (Please note: This is a Wednesday)

Time: 5:30 - 6 p.m., Registration/Dinner
6 - 8 p.m., Program

Location: Beechwood Hotel, 363 Plantation Street, Worcester; 508-754-5789, www.beechwoodhotel.com

Fee (by check only): Member/Associate Member, free*; Non-member, \$95. *Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact hours: Will be provided.

To register: complete the Regional Registration Form located on page 6 and submit it to the MNA Region 2 Office, 365 Shrewsbury Street, Worcester, MA 01604. For questions, please contact Region 2 at 508-756-5800 ext. 100 or email region2@mnam.org.

REGION 3



Morning Session: Gestational Diabetes

Description: This program will provide the nurse with the risk factors and patient considerations for Gestational Diabetes. The nursing management of Gestational Diabetes will be explored, as well as the key patient teaching considerations. Long-term implications for the mother and child will be discussed.

Presenter: Jodi Fortunato, MSN, RN

Afternoon Session: Legal Issues in Obstetric Nursing

Description: In this session the nurse will learn an overview of the litigation process including the four elements of malpractice and how bedside nurses can avoid being named in legal cases. The program will discuss what role the electronic medical records plays in nursing practice and hear actual case examples and outcomes.

Presenter: Dorene Goldstein, BSN, RNC, CLNC

Date: September 11, 2017

Time: 9-9:30 a.m., Registration/Continental Breakfast
9:30 a.m.-12 p.m., Morning Program
12-1 p.m., Lunch will be provided
1-4 p.m., Afternoon Program

Location: Trowbridge Tavern and Canal Club (located behind the hotel)
100 Trowbridge Road, Bourne; 508-743-9000

Fee (by check only): Member/Associate Member*, free; Non-member, \$95.

*Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact Hours: Will be provided.

Domestic and Sexual Violence Training:

What Nurses Need to Know

Description: This presentation will look at the dynamics of domestic and sexual violence, the health impact of violence and abuse as well as the consequences of childhood exposure to violence. The role of the nurse will be explored to include trauma-informed care.

Presenter: Erin Miller, MPS, MDV, CTSS, CASAC-T

Date: November 15, 2017

Time: 5 - 5:30 p.m., Registration/Dinner
5:30 - 8:30 p.m., Program

Location: Trowbridge Tavern and Canal Club (located behind the hotel)
100 Trowbridge Road, Bourne; 508-743-9000

Fee (by check only): Member/Associate Member*, free; Non-member, \$95.

*Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact Hours: Will be provided.

Disorders of the Skin: What Nurses Need to Know

Description: This program will provide nurses with information about dermatological issues, including psoriasis, eczema, rashes, acne and rosacea. An overview of the detection of melanoma, basal cell carcinoma, and squamous cell carcinoma will be provided. Cosmetic treatments and the management of skin disorders will also be discussed.

Presenter: Kathleen Brodt, MSN, FNP-BC, BSN

Date: December 6, 2017

Time: 5 - 5:30 p.m., Registration/Dinner
5:30 - 8 p.m., Program

Location: Trowbridge Tavern and Canal Club (located behind the hotel)
100 Trowbridge Road, Bourne; 508-743-9000

Fee (by check only): Member/Associate Member*, free; Non-member, \$95.

*Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact Hours: Will be provided.

To register: complete the Regional Registration Form located on page 6 and submit to the MNA Regional Council 3, PO Box 1363, Sandwich, MA 02563. For questions, please contact Region 3 at 508-888-5774 or email region3@mnarn.org.

REGION 4



Protecting Developing Brains: What Health Care Providers Need to Know About Sport-Related Concussion

Description: Brain injury among children and adolescents is a major public health concern. Although the majority of injuries are considered mild, a proportion of those injured will experience considerable physical, cognitive, educational, social, and emotional consequences. In this program, the focus will be on the diagnosis and management of head injury. Given its prevalence, the major focus of this presentation will be on sport-related concussions.

Presenter: Alex M. Taylor, Psy.D.

Date: September 21, 2017

Time: 5-6 p.m., Registration/Dinner
6-8:15 p.m., Program

Location: Danversport Yacht Club, 161 Elliot Street, Danvers; 978-774-8620, www.danversport.com

Fee (by check only): Member/Associate Member, free*; Non-member, \$95. *Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact Hours: Will be provided.

Cancer Survivorship Care: What Nurses Need to Know

Description: Cancer patients often survive long-term, yet face individualized challenges and health risks in later years. This session will increase the nurse's understanding of the unique needs of the cancer survivor population, provide current national and local resources to guide the care of this population and identify aspects of cancer survivorship care applicable to varied areas of nursing practice.

Presenters: Rich Boyajian, NP

Date: October 24, 2017

Time: 5-6 p.m., Registration/Dinner
6-8:15 p.m., Program

Location: Danversport Yacht Club, 161 Elliot Street, Danvers; 978-774-8620, www.danversport.com

Fee (by check only): Member/Associate Member*, free; Non-member, \$95. *Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact Hours: Will be provided.

Places in the Heart: The A, B, Cs of Cardiac Medications

Description: This session will take a physiologic approach to understanding cardiac medications commonly utilized in managing patients with cardiovascular disease. Specific pharmacologic agents to be reviewed include: Antiarrhythmics, ACE inhibitors, Angiotension receptor blockers, Beta blockers and Calcium channel blockers. Implications for administering and evaluating the effectiveness of these medications will also be highlighted.

Presenter: Carol Daddio Pierce, MS, RN, CCRN

Date: November 8, 2017

Time: 5 - 6 p.m., Registration/Dinner
6 - 8:15 p.m., Program

Location: Danversport Yacht Club, 161 Elliot Street, Danvers; 978-774-8620, www.danversport.com

Fee (by check only): Member/Associate Member, free*; Non-member, \$95. *Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact Hours: Will be provided.

To register: complete the Regional Registration Form located on page 6 and submit to the MNA Regional Council 4, 50 Salem Street, Building A, Lynnfield, MA 01940. For questions, please contact Region 4 at 781-584-8012 or email region4@mnarn.org.



Places in the Heart: The ABCs of Cardiac Medications

Description: This program will take a physiological approach to understanding cardiac medications commonly utilized in managing patients with cardiovascular disease. Specific pharmacologic agents to be reviewed include anti-arrhythmics, ACE inhibitors, angiotensin receptor blockers, beta blockers and calcium channel blockers. Implications for administering and evaluating the effectiveness of these medications will also be highlighted.

Presenter: Carol Daddio Pierce, MS, RN, CCRN

Date: October 18, 2017

Time: 5 - 5:30 p.m., Registration/Dinner
5:30 - 8 p.m., Program

Location: MNA Headquarters, 340 Turnpike Street, Canton, 781-821-8255

Fee (by check only): Member/Associate Member*, free; Non-member, \$95. *Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact Hours: Will be provided.

Nursing Care of the LGBTQ Community

Description: Health outcomes for members of the LGBTQ community are affected by the provision of culturally competent care. Identification of barriers to care and an understanding of correct terminology related to gender and sexuality will be discussed. Nursing care of the transgender community, including best practices and emerging issues, will be explored.

Presenters: Kaitlin Nichols, BSN, RN, ACRN; and member(s) of the transgender community

Date: November 29, 2017

Time: 5 - 5:30 p.m., Registration/Dinner
5:30 - 7:45 p.m., Program

Location: MNA Headquarters, 340 Turnpike Street, Canton, 781-821-8255

Fee (by check only): Member/Associate Member*, free; Non-member, \$95. *Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact Hours: Will be provided.

Domestic and Sexual Violence Training: What Nurses Need to Know

Description: This presentation will look at the dynamics of Domestic & Sexual Violence, the health impact of violence and abuse, and the consequence of children's exposure to violence. The role of the nurse will be explored to include trauma-informed care.

Presenter: Erin Miller, MPS, MDV, CTSS, CASAC-T

Date: December 13, 2017

Time: 5 - 5:30 p.m., Registration/Dinner
5:30 - 8:30 p.m., Program

Location: MNA Headquarters, 340 Turnpike Street, Canton, 781-821-8255

Fee (by check only): Member/Associate Member, free*; Non-member, \$95. *Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact Hours: Will be provided.

To register: complete the Regional Registration Form located on page 6 and submit to the MNA Region 5 Office, 340 Turnpike Street, Canton, MA 02021. For questions, please contact Region 5 at 781-821-8255 or email region5@mnarn.org.

Basic Dysrhythmia Interpretation

Description: This two-part course is designed for registered nurses working with cardiac monitoring. Implications and clinical management of cardiac dysrhythmias will be discussed. The course will include a text book and requires studying between sessions.

Presenters: Mary Sue Howlett, PhD(c), RN/FNP-BC, CEN; Carol Mallia, MSN, RN

Dates: September 22, 2017 (part-one)

September 29, 2017 (part-two)

Time: 8:30 - 9 a.m., Registration
9 a.m. - 3 p.m., Program; light lunch provided

Location: MNA Headquarters, 340 Turnpike St., Canton, MA

Fee: Member/Associate Member, free*; Non-member, \$195. *Requires a \$50 placeholder fee which will be returned upon attendance at program. **There is a non-refundable fee of \$30 for workbook and calipers.**

Contact Hours: Will be provided.

MNA Contact: Theresa Yannetty, 781-830-5727

Advanced Cardiac Life Support (ACLS): Certification and Recertification

Description: This AHA course will provide information on the clinical management of medical emergencies through a case study approach. This is a two-day certification and a one-day recertification course. *This challenging course is best suited for nurses working in acute or critical care areas. Attendees must be proficient in dysrhythmia interpretation. Please note the dates of the Basic Dysrhythmia program if not proficient in dysrhythmia interpretation!*

Presenters: Carol Mallia, MSN, RN; Mary Sue Howlett, PhD (c), RN/FNP-BC, CEN; Charlene L. Richardson, MSN, RN, CEN, LNC and other instructors for the clinical sessions

Dates: October 25 and November 1, 2017 (Certification)

November 1, 2017 (Recertification only)

Time: 8:30 - 9 a.m., Registration
9 a.m. - 5 p.m., Program (light lunch provided)

Location: MNA Headquarters, 340 Turnpike St., Canton, MA

Fee: Certification: MNA Member/Associate Member, free*; Non-member, \$250. Recertification: MNA Member/Associate Member, free*; Non-member, \$195

***Requires \$100 placeholder fee which will be returned upon attendance at program. There is a non-refundable cost of \$35 for the workbook.**

Contact Hours: Contact hours will not be awarded for this program.

MNA Contact: Liz Chmielinski, 781-830-5719

Nurse Burnout: That Ain't Just Smoke, That's YOU! How to Avoid Becoming the Human Flashpoint

Description: The goal of this program is to help nurses prevent, identify and manage compassion fatigue. Nursing is a hard emotional, physical, and spiritual work, but it is also very rewarding. Tension and turmoil come within the territory of being a nurse. The stresses and strains of working in the nursing industry can take their toll on even the strongest personality. From persistent patients to strict regulations, nurses are constantly facing challenges both big and small, physical and emotional. At some point, it is more than likely that the pressures of your job will get to you and you will wonder, "Is it worth it?" Burnout, also known as *compassion fatigue*, can get the best of you, but only if you let it.

Presenter: Mary Linda O'Reilly, MS, APRN, BC

Date: November 30, 2017

Time: 5-5:30 p.m., Registration/Light Dinner
5:30-7:45 p.m., Program

Location: MNA Headquarters, 340 Turnpike St., Canton, MA

Fee: Member/Associate Member, free*; Non-member, \$95. *Requires a \$25 placeholder fee which will be returned upon attendance at program.

Contact Hours: Will be provided.

MNA Contact: Susan Clish, 781-830-5723

MNA Headquarters Course Registration: complete the MNA Headquarters Registration Form located on Page 7 or register online at massnurses.org. Credit card payment is available for CE courses offered at MNA Headquarters.

REGIONAL REGISTRATION

Registration Directions: Registration will be processed on a space available basis. All programs are free to members; however, there is a placeholder fee of \$25 for all evening programs and \$50 for all full day programs. This fee will be returned upon attendance at the program. Program fees for non-members are \$95 for evening programs and \$195 for all full day programs. If registrants do not attend the program or call to cancel, the fee will NOT be refunded. Please submit a **separate check for each program** and mail to the appropriate region office. If registering for programs in more than one region, please duplicate the registration form or download from www.massnurses.org and submit registration forms to the appropriate region offices with the specified fee.

Payment: Payment may be made by mailing a **separate check for each course** to the appropriate regional office. At this time regional offices are unable to process credit card information for this purpose. Thank you for your understanding on this matter.

Program Cancellation: MNA reserves the right to change speakers or cancel programs due to extenuating circumstances. In case of inclement weather, please call the MNA Region Office registration contact telephone number to determine whether a program will run as originally scheduled. Registration fee will be reimbursed for all cancelled programs.

Contact Hours: Contact hours will be awarded by the Massachusetts Nurses Association for all programs.

To successfully complete a program and receive contact hours or a certificate of attendance, you must: (1) sign in; (2) be present for the entire time period of the program; and (3) complete and submit the program evaluation.

The Massachusetts Nurses Association is accredited with distinction as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

Chemical Sensitivity: Scents may trigger responses in those with chemical sensitivities. Please avoid wearing scented personal products when attending MNA continuing education programs.

Disability Help: Please contact the MNA Regional Council Office with any questions about special needs accessibility.

Please print. Mail this completed form along with a separate check for each course to appropriate region. Please make copies of this form for courses at multiple regions or download this brochure at www.massnurses.org.

Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Place of Employment _____

_____ RN _____ LPN _____ APN _____ Other (specify) _____

Region 1 Make check payable to: MNA Region 1 Office and mail to MNA Region 1 Office, 241 King Street, Suite 226, Northampton, MA 01060.

- Psychiatric Competencies for the Non-Psych RN** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee.
- Optimizing Home Safety for Persons with Progressive Memory Loss** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee.
- Domestic and Sexual Violence Training: What Nurses Should Know and Best Practices for Nurses: Assessment, Implementation and Evaluation for Pain Management Strategies in the Face of the Opioid Crisis** Non-member: \$195 • Member/Associate Member: \$50 placeholder fee.

Region 2 Make check payable to: MNA Region 2 and mail to MNA Region 2 Office, 365 Shrewsbury Street, Worcester, MA 01604.

- Abortion: Information for Nurses** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee
- Domestic and Sexual Violence Training: What Nurses Should Know** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee
- Human Trafficking: The Nursing Implications of Trauma and Survival** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee

Region 3 Make check payable to: MNA Region 3 and mail to MNA Regional Council 3, PO Box 1363, Sandwich, MA 02563.

- Gestational Diabetes and Legal Issues in Obstetric Nursing** Non-member: \$195 • Member/Associate Member: \$50 placeholder fee.
- Domestic and Sexual Violence Training: What Nurses Should Know** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee
- Disorders of the Skin: What Nurses Need to Know** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee

Region 4 Make check payable to: MNA Regional Council 4 and mail to MNA Regional Council 4, 50 Salem Street, Building A, Lynnfield, MA 01940.

- Protecting Developing Brains: What Health Care Providers Need to Know About Sport-Related Concussion** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee
- Cancer Survivorship Care: What Nurses Need to Know** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee
- Places in the Heart: The A, B, Cs of Cardiac Medications** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee

Region 5 Make check payable to: MNA Region 5 Office and mail to MNA Region 5, 340 Turnpike Street, Canton, MA 02021.

- Places in the Heart: The ABCs of Cardiac Medications** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee
- Nursing Care of the LGBTQ Community** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee
- Domestic & Sexual Violence Training; What Nurses Need to Know** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee

MNA HEADQUARTERS REGISTRATION

Registration Directions: Registration will be processed on a space available basis. All programs are free to members; however, there is a placeholder fee of \$25 for all evening programs and \$50 for all full day programs (except for ACLS). This fee will be returned upon attendance at the program. Program fees for non-members are \$95 for evening programs and \$195 for all full day programs (except for ACLS). If registrants do not attend the program or call to cancel, the fee will NOT be refunded.

For courses offered at MNA headquarters, registration/payment of fee is available online. Visit our website at www.massnurses.org and register for the course of your choice from our Events Calendar.

Payment: Payment may be made with a Master Card, Visa, Discover or AMEX by calling the MNA contact person listed or by mailing a **separate check for each program** to the MNA, 340 Turnpike Street, Canton, MA 02021.

Program Cancellation: MNA reserves the right to change speakers or cancel programs due to extenuating circumstances. In case of inclement weather, please call the MNA at 781-821-4625 or 800-882-2056 to determine whether a program will run as originally scheduled. Registration fee will be reimbursed for all cancelled programs.


Contact Hours: Contact hours will be awarded by the Massachusetts Nurses Association for all programs except for ACLS certification.

To successfully complete a program and receive contact hours or a certificate of attendance, you must: (1) sign in; (2) be present for the entire time period of the program; and (3) complete and submit the program evaluation.

The Massachusetts Nurses Association is accredited with distinction as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

Chemical Sensitivity: Scents may trigger responses in those with chemical sensitivities. Please avoid wearing scented personal products when attending MNA continuing education programs.

Disability Help: Please contact the MNA Division of Nursing with any questions about special needs accessibility.

Now Available  **Online registration for courses offered at MNA Headquarters.**

Go to www.massnurses.org.

Due to heavy traffic volume on major roadways, please allow extra travel time.

Directions to MNA Headquarters

From Logan International Airport: Take the Ted Williams Tunnel. Follow signs to I-93 S/ SOUTHEAST EXPRESSWAY. Stay on I-93 S for approximately 15 miles. Take EXIT 2A/ RT-138 S/ STOUGHTON. Follow directions from RT-138 below.

From Boston: Take I-93 S/ SOUTHEAST EXPRESSWAY. Stay on I-93 S to EXIT 2A/ RT-138 S/ STOUGHTON. Follow directions from RT-138 below.

From Cape Cod/South Shore: Take RT-3 N. Merge onto US-1 S/ I-93 S via exit number 20 on the left toward I-95/ DEDHAM. Take EXIT 2A/ RT-138 S/ STOUGHTON. Follow directions from RT-138 below.

From the North: Take I-95 S/ RT-128 S to I-93 N/ US-1 N. You will see a sign reading "I-93 N to BRAINTREE/ CAPE COD." Continue onto I-93 N/ US-1 N for 1.2 miles. Take EXIT 2A/ RT-138 S/ STOUGHTON. Follow directions from RT-138 below.

From the West: Take Mass. Pike East to I-95 S/ RT-128 S. Take I-95 S/ RT-128 S to I-93 N/ US-1 N. You will see a sign reading "I-93 N to BRAINTREE/ CAPE COD." Continue onto I-93 N/ US-1 N for 1.2 miles. Take EXIT 2A/ RT-138 S/ STOUGHTON. Follow directions from RT-138 below.

From RT-138 (Turnpike Street): Drive approximately 2 miles (you will pass through two traffic lights). Take a left at the billboard which reads 320-348 Turnpike Street. Follow the road, which curves to the right. You will see the brick Massachusetts Nurses Association building. The MNA is on the second floor.

Please print. You may make copies of this form or download this brochure at www.massnurses.org.

Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Place of Employment: _____

_____ RN _____ LPN _____ APN _____ Other (specify) _____

Please mail this completed form with check made payable to MNA at: Massachusetts Nurses Association • 340 Turnpike Street • Canton, MA 02021

Payment may also be made by: VISA MasterCard American Express Discover

Account #: _____ Expiration Date: _____ Security code: _____

For Credit Card registrations you may fax this form to: 781-821-4445; please call to verify receipt, 781-821-4625.

For office use only: Chg code: _____ Amt: Date: _____ Ck#: _____ Ck.Date: _____ Init: _____

Basic Dysrhythmia Interpretation Member/Associate Member, free*; Non-member, \$195. *Requires a \$50 placeholder fee which will be returned upon attendance at program. **There is a non-refundable fee of \$30 for workbook and calipers.**

ACLS Certification and Recertification Certification: MNA Member/Associate Member, \$35 non-refundable cost for workbook; Non-member, \$250* Recertification: MNA Member/Associate Member, \$35 non-refundable cost for workbook; Non-member, \$195*

***Requires \$100 placeholder fee which will be returned upon attendance at program.**

Please choose one: Certification October 25 and November 1 Recertification November 1 only

Nurse Burnout: That Ain't Just Smoke, That's YOU! How to Avoid Becoming the Human Flashpoint Non-member: \$95 • Member/Associate Member: \$25 placeholder fee.

SAFE PATIENT LIMITS SAVE LIVES



MNASM Massachusetts Nurses Association

2017

CONVENTION

October 12-13 Sheraton Framingham

1657 Worcester Rd, Framingham, MA 01701

SCHEDULE

Wednesday, October 11

6:30-9 p.m. Reception/Entertainment sponsored by Region 2

Thursday, October 12

7:30-8:15 a.m. Breakfast, registration, exhibits & silent auction opens

8:15-8:30 a.m. MNA Announcements and Updates, Donna Kelly Williams, RN

8:30-9:30 a.m. Labor Program, Bill Barry – Right to Work

9:30-10:30 a.m. Bargaining Unit Reports

10:30-11 a.m. Break, exhibits and silent auction

11 a.m.-12:30 p.m. *Immigration Issues and the Impact on Health Care* – Panel Program

12:30-2 p.m. Lunch, exhibits, silent auction

12:30-2 p.m. Unit 7 Annual Meeting and Lunch

2 p.m. Business Meeting

6:30-9 p.m. Awards Dinner

9-10:30 p.m. Nurses' Fun Night event: *Dueling Pianos*

Friday, October 13

7-8:30 a.m. Registration, breakfast

8:30 a.m. Silent auction closes

8-9 a.m. MNA PAC Meeting

8-9 a.m. Massachusetts Student Nurses Association Meeting

9-9:15 a.m. MNA announcements & speaker introduction

9:15-10:30 a.m. *IV Dilemmas at the Bedside*, Laura Gasparis Vonfrolio, PhD, RN

10:30-10:45 a.m. Break

10:45 a.m.-12 p.m. *Evidence-Based Practice Related to Safe Staffing* Laura Gasparis Vonfrolio, PhD, RN

2017 SPEAKERS

Bill Barry

Bill Barry is a labor historian and author, and is the retired Director of Labor Studies at The Community College of Baltimore County in Dundalk, Maryland. He was a union organizer for 20 years before that. He has written several books on trade unionism: *I Just Got Elected*, *Now What: The New Union Officer's Handbook*; *Union Strategies for Hard Times*; *From First Contact to First Contract: An Organizer's Handbook*, *The 1877 Railroad Strike in Baltimore*; and, *Closing up the Open Shop: A Guide to Internal Organizing*. Bill has also been a three-time candidate for Baltimore City Council as a Green Party member in northeast Baltimore. Bill Barry is currently active in the Association for Union Democracy.

Laura Gasparis Vonfrolio, PhD, RN

An outstanding seminar leader, Dr. Gasparis Vonfrolio has been a nurse for over 30 years in critical care nursing and has held CCRN and CEN certifications over 13 years. She obtained an associate and bachelor's degree in nursing, master's from NYU in nursing and a PhD in nursing education.

She has held positions as a staff nurse, staff development instructor and a tenured professor of nursing. Dr. Gasparis Vonfrolio has published over 30 articles and authored 11 books including the *Critical Care Examination Review* and *Emergency Nursing Examination Review* books, *12 Lead EKG Stat!* and *25 Stupid Things Nurses Do to Self-Destruct*.

She organized the "Nurses March on Washington, D.C." with over 35,000 nurses protesting in what has been a catalyst for nurse legislation for safe patient ratios. She is the former President of the National Nurses in Business Association and the current president of Education Enterprises. Laura has appeared on television shows, *Good Morning America* and *Nightline* discussing nursing issues.

INFORMATION:

Hotel Accommodations at Sheraton

The reduced room rate of \$167.55 per night (inclusive of tax) is available until September 12, 2017. Please call 888-627-7184 and mention the MNA Fall Convention or book online at: <https://www.starwoodmeeting.com/Book/manurse2017>

Chemical Sensitivity

Attendees are requested to avoid wearing scented personal products when attending the 2017 MNA Convention. Scents may trigger responses in those with chemical sensitivity.

Contact Hours

Contact hours will be provided for three of the educational sessions for this two day conference (*Immigration*, *IV Dilemmas* and *Safe Staffing*). These programs meet the requirements of the Massachusetts Board of Registration in Nursing for a total of 4.6 contact hours for re-licensure. In terms of specialty certification, these programs will provide a total of 3.8 contact hours. MNA is accredited, with distinction, as a provider of nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

To successfully complete a program and receive contact hours you must: 1) sign in, 2) be present for the entire time period of the session and 3) Complete the evaluation.

Questions: Call MNA's Division of Nursing at: 800-882-2056 x727.

REGISTER ONLINE: www.massnurses.org

Registrations can also be made by phone. Call Theresa at 781-830-5727.

**SAFE
PATIENT
LIMITS**



2017

CONVENTION

October 12-13 Sheraton Framingham

1657 Worcester Rd, Framingham, MA 01701

REGISTRATION FORM

Registration is available online. Go to www.massnurses.org.

Day Ph: _____

Name (please print): _____ Night Ph: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

RN APN Other (specify): _____

I am a(n): MNA Member/Associate Member Full-time student/Unemployed/Retired*
 Non-member MASNA students (free), call to register: 1-781-830-5727
 Check here if you require gluten-free. Check here if you require special assistance during the convention, and please call 800-882-2056 x727.

Three Convenient Packages/Business Meeting

Thursday-Only Package: Includes events on Thursday: keynote, plenary session, all meals, exhibits

MNA Members \$40 Reduced Members* \$35 All Others \$50 MASNA students n/c \$ _____

Friday-Only Package: Includes events on Friday: keynote, plenary session, breakfast

MNA Members \$35 Reduced Members* \$30 All Others \$50 MASNA students n/c \$ _____

Two-Day Convention Package — Thursday and Friday:

Includes events on Thursday and Friday

MNA Members \$75 Reduced Members* \$65 All Others \$100 MASNA students n/c \$ _____

Business Meeting Registration (only) • Thursday, 2 p.m. _____ n/c

* includes full-time students (minimum 12 credits), unemployed and retired.

Optional Events

Please register below if you plan to attend the following events:

Reception sponsored by Region 2 • Wednesday, October 11 • 6:30 - 9 p.m. _____ n/c

Unit 7 Annual Meeting/Lunch (Unit 7 members only) • Thursday, 12:30 - 2 p.m. _____ n/c

Awards Dinner • Thursday, 6:30 - 9 p.m. _____ n/c

Nurses' Fun Night • Thursday, 9 - 10:30 p.m. _____ n/c

Total Convention Fees: \$ _____

Payment

Please mail this completed form with check made payable to MNA to:

Massachusetts Nurses Association • 340 Turnpike Street • Canton, MA 02021

Payment may also be made by: VISA MasterCard American Express Discover

Account# _____ Expiration Date: _____ Security Code: _____

For Credit Card registrations you may fax this form to: 781-821-4445; please call to verify receipt at 781-830-5727.

For office use only: Chg code: _____ Amt: _____ Date: _____ Ck#: _____ Ck.Date: _____ Init: _____



MEMBER MOBILIZATION

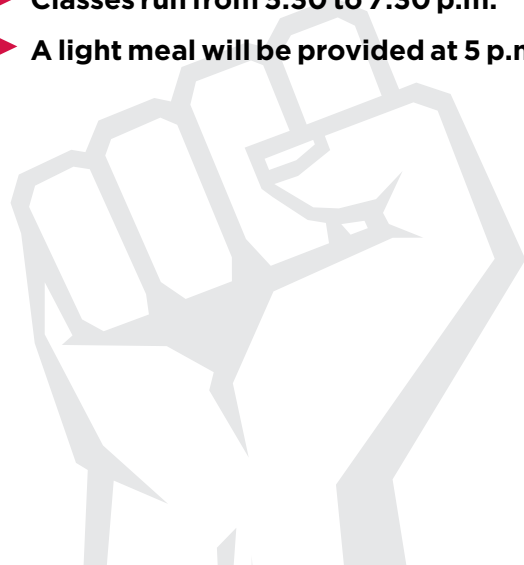


Classes offered by the MNA Labor School for all members.



All MNA members are free to attend any classes that they are interested in, at any of the Regional offices.

- ▶ Classes run from 5:30 to 7:30 p.m.
- ▶ A light meal will be provided at 5 p.m.



GET MOBILIZED FREE for all members

Region 1

Monday, Sept. 25
 Monday, Oct. 2
 Monday, Oct. 16
 Monday, Oct. 23

Region 2

Tuesday, Sept. 19
 Tuesday, Oct. 10
 Tuesday, Oct. 24
 Tuesday, Nov. 21

Region 3

Wednesday, Sept. 20
 Wednesday, Oct. 4
 Wednesday, Oct. 18
 Wednesday, Nov. 8

Region 4

Thursday, Sept. 28
 Thursday, Oct. 5
 Thursday, Oct. 26
 Thursday, Nov. 9

Region 5

Tuesday, Sept. 12
 Tuesday, Sept. 26
 Tuesday, Oct. 3
 Tuesday, Oct. 17

Course titles for this series:

Week #1

The Purpose of a Union
 How members experience the Union
 Structure of the MNA and the bargaining units
 MNA By Laws and unit Guidelines
 Union visibility at the workplace

Week #2

Mapping and charting the membership
 Organizing at the workplace
 Tackling apathy
 Involving the members and attracting new activists
 Collective action around issues & grievances

Week #3

Internal Communications
 Contract language that builds the Union
 Union orientation
 Running Union meetings
 Open bargaining sessions

Week #4

Mobilization vs. Organizing
 Coalition building
 Allies, regulators, legislators, clergy and vendors
 The patients and the public
 Highlights of US Labor History

Contact your regional office to register for these important classes!

Region 1 Office, Allyson Garcia, 413-584-4607, region1@mnarn.org

Region 2 Office, Carey Zimmerman, 508-756-5800 ext. 100, region2@mnarn.org

Region 3 Office, Pat Conway, 508-888-5774, region3@mnarn.org

Region 4 Office, Peggy O'Malley, RN, 781-584-8012, region4@mnarn.org

Region 5 Office, Harriett Duggan, 781-821-8255, region5@mnarn.org

